ABSTRACT

INTRODUCTION:

Bladder cancer currently occupies eighth place, 90% being urothelial neoplasms. Current clinical and pathological variables have limited ability to predict tumor recurrence and progression.With availability of effective chemotherapy there is need for accurate predictors.Ki 67 is expressed by proliferating cells and can be observed immunohistochemically. Nuclear Ki 67 antigen expression is a measure of cell growth fraction and hence measures biological aggressiveness of malignancy.

AIMS:

To determine correlation of clinicopathological characteristics and Ki 67 expression with tumour grading and staging,thereby its impact on prognosis and clinical outcome.

METHODS:

This is a prospective study undertaken for a period of 1year. Clinical details of 30 bladder carcinoma patients were recorded and their TURBT specimens received are subjected to histopathological and immunohistochemical study. Ki 67 scoring was done and compared with grading and staging.

RESULTS:

A total of 77% of the patients presented with painless hematuria.The mean age was 64 ± 4 years old and the male to female ratio was 5:1. A total of 63% of the patients had muscle invasive disease at the time of presentation. Overall 33% (10 0f 30) of the patients had low-grade disease and 67% (20 of 30) had high grade tumors. The analysis of Ki 67 expression immunohistochemically revealed, higher values (i.e 3+ and 4+) in high grade tumors and t2 stage tumors.

CONCLUSION:

Proliferative activity of urothelial neoplasms assessed by Ki 67 expression correlated well with tumor grading and staging. Therefore it indicates prognosis and clinical outcome of patients.

Key words: urothelial neoplasms, prognostic factors, age, gender, smoking, Ki 67.